

**FAYETTE COUNTY COURTS
JUROR QUESTIONNAIRE**

Name _____

Street Address _____

City _____ GA _____ Zip _____

Telephone: () _____ Home () _____ Work _____

Please provide any additional contact information.

If you have any questions concerning this form,
please contact court personnel at 770-461-4703.

The purpose of this questionnaire is to obtain information to determine if you are qualified to serve as a grand or trial juror. It is not a jury summons. Trial by jury is a valuable right of all Georgia citizens. The participation of every citizen is important to preserving this right. Jury service is both an opportunity to serve your state and fellow citizens as well as an obligation.

You must answer every question on the form and return it to the court address shown above. If you are unable to fill out this form and someone does it for you, please indicate why this was necessary in the section marked "Remarks" below. If you do not complete the form, the court may order you to do so at the courthouse at your own expense.

If your address changes after you have returned this questionnaire, please notify the courts by mail addressed to the "Jury Manager".

PLEASE COMPLETE AND RETURN BY _____.

SECTION A. QUALIFICATION QUESTIONS

1. ARE YOU A U.S. CITIZEN? YES ____ NO ____
2. ARE YOU 18 YEARS OF AGE OR OLDER? YES ____ NO ____
3. ARE YOU A REGISTERED VOTER IN THIS COUNTY? YES ____ NO ____
4. DATE OF BIRTH: DAY ____ MONTH ____ YEAR ____
5. SOCIAL SECURITY NUMBER: _____
6. GENDER: MALE ____ FEMALE ____
7. ARE YOU HISPANIC? YES ____ NO ____
8. RACE: WHITE ____ AFRICAN AMERICAN ____ OTHER ____
9. A. HAVE YOU EVER BEEN CONVICTED OF A FELONY
VIOLATION OF STATE OR FEDERAL LAW? YES ____ NO ____
- B. IF YES, WERE YOUR CIVIL RIGHTS RESTORED? YES ____ NO ____
10. DO YOU HAVE ANY PHYSICAL OR MENTAL DISABILITY THAT WOULD
INTERFERE WITH OR PREVENT YOU FROM SERVING AS A JUROR?
(If "yes", please read the notes in Section B.) YES ____ NO ____
11. HAVE YOU SERVED ON JURY DUTY IN THIS COUNTY IN THE PAST TWO
YEARS? YES ____ NO ____
12. IF YOU ARE 70 YEARS OF AGE OR OLDER, DO YOU WANT TO SERVE ON A
JURY? YES ____ NO ____
(If "no", please read the notes in Section B.)

SECTION B. NOTES AND REMARKS

Questions 6 and 7. The answer to these questions are required solely to avoid discrimination in juror selection and has no bearing on your qualifications to serve. By answering these questions, you help the court ensure that the jurors are selected from a fair cross-section of the community.

Question 9. If you claim a physical or mental disability, please explain and attach a doctor's certificate indicating the disability and whether the condition is permanent.

Question 12. If you answered "no" to this question, you must complete an affidavit form which can be obtained from the Jury Manager.

REMARKS:

I SWEAR THAT THE PREVIOUS ANSWERS ARE TRUE AND CORRECT. I UNDERSTAND THAT THE COURT MAY IMPOSE PUNISHMENT UPON ME FOR MAKING A FALSE STATEMENT.

SIGN HERE: _____

DATE: _____

**Please return this form to the Fayette County Superior Court, Attn: Jury Clerk
P. O. Box 130 Fayetteville, GA 30214**